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PTO/SB/50 (08-P2)

Approved for use through 12/30/2000 OMB 0651-0038

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## REISSUE PATENT APPLICATION TRANSMITTAL

	Commissioner for Patents Box Reissue			Attorney Docket No.			125.028USR1				
Address to:				First Named Inventor			Michael M. Walters, et al.				
				Original Patent Number			6,278,263				
Washington, DC 20231				Original Patent Issue Date (Month/Day/Year)			08/21/01				
			Expres	ss Mail	Label No.	EL823841819US					
(che	eck appli	REISSUE OF: cable box)	X Utility Pate	ent	nt Design Patent Plant Patent						
API	PLICATION	ON ELEMENTS (37 CFF	1.173)			CCOMPANYIN	IG APPL	ICATION PARTS			
1. X Fee	V Fee Transmittel Francisco (DEC/OR/ES)			7. Statement of status/support for all changes to the claims. See 37 CFR 1.173(c).							
2. Ap	pplicant claims small entity status. See 37 CFR 1.27.			8.	<u>-                                   </u>						
3. Specification and Claims in double column copy of patent format (amended, if appropriate)				Ribboned Original Patent Grant							
ραι	ioni ionii	ас (ателией, іг арргоргіі	ate)		Statement of Loss (PTO/SB/55)						
	4. X Drawing(s) (proposed amendments, if appropriate)			9.	9. Foreign Priority Claim (35 U.S.C. 119) (if applicable)						
5. X Reissue Oath/Declaration (original or copy) (37 CFR § 1.175)(PTO/SB/51 or 52)			10.	10. Information Disclosure Copies Statement (IDS)/PTO-							
6. Original U	.S. Pater	nt currently assigned?				Statement (	ו א/נסטו	O- Chanons			
X Yes No			11. English Translation of Reissue Oath/Declaration (if applicable)								
(If Yes, check applicable box(es))			12. X Preliminary Amendment								
X Written Consent of all Assignees (PTO/SB/53)			13. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)								
			14. Other:								
X 37 CFR 3.73(b) Power of Attorney											
Statement (PTO/SB/96)											
		1	5. CORRESPO	NDENC	E ADD	RESS					
X Customer Number or Bar Code Label 27			07	3	or	X Con	rrespondence address below				
Name Laura A. Ryan											
				120							
Fogg, Slifer, Polglaze, Leffert & Jay, P.A P.O. Box 581009			A.	·····							
City Minneapolis State		MN	1	Zip	Code	55458-1009					
Country	USA	T .	Telephon		2-312-		Fax	612-312-2250			
Name (Print/Ty	rpe)	Laura A. Ryan		Re	gistratio	n No. (Attorney/.	Agent)	49,055			
Signature Kaural W		/ }	ز			Date	January 11, 2002				

PTO/SB/56 (08-00)

Approved for use through 12/30/2000 OMB 0651-0033

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REISSUE APPLICATION EEE TRANSMITTAL FORM							Docket Number (optional)					
REISSUE APPLICATION FEE TRANSMITTAL FORM  Claims as Filed – Part 1								125.028USR1				
Patent	Reissue Applicati		ra F	late		-ee	T	$\Gamma$	Rate	Siliali	Fee	
(A) 18 Total Claims (37 CFR 1 16(j))	(B) 22	**** 2	= x \$	=				x \$	18 =		36.00	
(C) 3 Independent claims (37 CFR 1.16(j))	(D) 5	* 3	= x \$	=			or	x \$	84 =		168.00	
Basic Fee (37 CFR 1 16(h)) \$										\$	740.00	
	Total Filing	Total Filing Fee		\$				OR	\$	944.00		
	(A)		ns as Am	ended – I	Part 2							
	(1) Remaining Amendment	(2) Highest No	(3) Extra Claims Present	Small Entity				Other than a Small Entity				
	anonament	Previously Paid For		Rat	Rate Fee				Rate		Fee	
Total Claims *** (37 CFR 11.16(j))	MINU	JS **	* =	x \$	=				×\$	=		
Independent claims 37 CFR 1.16(j))	MINU	JS *****	=	x \$					x \$	=		
			Total Addi	tional Fee	\$				OR	\$		
*** If the "Highest Number of To  *** After any cancellation of cla  **** If "A" is greater than 20, use  ***** "Highest Number of Independent Claims small  Applicant claims small  Please charge Deposit A duplicate copy of thi  X The Commissioner is or credit any overpaym A duplicate copy of thi  X A check in the amount  Payment by credit card  January 11, 20  Date	ims.  e (B-A), if "A" is 20 endent Claims Present the entity status Section of the entity status Section of the entity status Section of the entity authorized the entity author	or less, use (B-2 ciously Paid For e 37 CFR 1 27 d to charge any account No d.	20). " or Number	the amounts under 37	nt of	\$ 1.16 or 1. enclosed	it, At	torn	·	t of Re	cord	

REISSUE APPLICATION: CONSENT O STATEMENT OF NON-ASSIGN	Docket Number (Optional) 125.028USR1					
This is part of the application for a reissue patent base	ed on the original pate	ent identified below.				
Name of Patentee(s) Michael M. Walters, Charle	es E. Hawkes, and	Robert H. Isham				
Patent Number	Date Patent Issued					
5,278,263	August 21, 2001	I				
Title of Invention MULTI-PHASE CONVERTER WITH BALANCED CUF	RENTS					
1. X Filed herein is a certificate under 37 CFR 3.7	3(b). (Form PTO/SB/	96)				
2. Ownership of the patent is in the inventor(s),	and no assignment of	the patent is in effect.				
One of boxes 1 or 2 above must be checked. If multip lox 2 is checked, skip the next entry and go directly to	le assignees, comple "Name of Assignee".	te this form for each assignee. If				
The written consent of all assignees and inventors own his application for reissue.	ning an undivided inte	rest in the original patent is included in				
		Intersil Communications, Inc. 2401 Palm Bay Road NE MS 53-209				
he assignee(s) owning an undivided interest in said on the assignee(s) consents to the accompanying applications.	riginal patent is/are _ plication for reissue.	Palm Bay, Florida 32905 ,				
lame of assignee/inventor (if not assigned)						
yped or printed name and the title or person	Date 1/10	102				
igning for assignee (if assigned)						
aul A. Bernkopf Chief Intellectual Property Counsel & Corporate A	ssistant Secretary					
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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/PatentOwner_Intersil Communications, Inc.
Application No./Patent No.: 09/591,404 - 6,278,263 Filed/Issue Date: 06/12/00 - 08/21/01
Entitled: MULTI-PHASE CONVERTER WITH BALANCED CURRENTS
Intersil Communications, Inc. a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:
1. the assignee of the entire right, title, and interest; or
2. an assignee of an undivided part interest
in the patent application/patent identified above by virtue of either:
A. [ ] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
OR
B. [ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:
1. From: Michael M. Walters, et al. To: Intersil Corporation  The document was recorded in the Patent and Trademark Office at  Reel 10889 , Frame 0719 , or for which a copy thereof is attached.
2. From: Intersil Corporation To: Intersil Communications, Inc.  The document was recorded in the Patent and Trademark Office at  Reel, Frame, or for which a copy thereof is attached.
3. From:To:
The document was recorded in the Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
[ ] Additional documents in the chain of title are listed on a supplemental sheet.
Copies of assignments or other documents in the chain of title are attached.  [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]
The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.    1/0/02
Paul A. Bernkopf
Typed or printed name
Chief IP Counsel & Corp. Asst. Sec.
Title

## State of Delaware

## Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE RESTATED CERTIFICATE OF "INTERSIL CORPORATION", CHANGING ITS NAME FROM "INTERSIL CORPORATION" TO "INTERSIL COMMUNICATIONS, INC.", FILED IN THIS OFFICE ON THE TWENTY-FIFTH DAY OF MAY, A.D. 2001, AT 4:15 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



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Harriet Smith Windson, Socretary of State

AUTHENTICATION: 1155634

DATE: 05-25-01

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